

SCOTTSDALE UNIFIED SCHOOL DISTRICT

SECTION 504 LEVEL I NOTICE OF APPEAL

To: Dr. Milissa W. Sackos
District 504 Compliance Specialist
Scottsdale Unified School District
Education Center
3811 N. 44th Street
Phoenix, Arizona. 85018-5420
480-484-6113

Date Appeal was received:

Student Name: DOB:

School: Grade:

Parent/Guardian: Phone Number:

Address: City: Zip:

I. Please state why you disagree with the decision(s) of the school §504 Committee.
Include any evidence and/or documentation that supports your position.
(attach copies to this form)

II. Please state the desired resolutions/outcomes you feel appropriate to resolve the disagreement.

III. Decision of Administrative Appeal:

District 504 Compliance Specialist: _____

Date: _____